

EXHIBIT 5

MEDICAL RECORDS INVOICES



INVOICE

INVOICE DATE	INVOICE NUMBER
3/11/2008	017563.332.02

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
North Hampton Dermatology Associates (Bruce Goldstein, MD)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.02		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locator	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$8.75 (entity's fee) / 4 (requesting defendants)	\$2.19
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -235 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 15 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requester 15 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$37.19		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

3-17-08
20-709 - Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
3/14/2008	017563.332.06

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Cambridge Podiatry (Edward J. Mostone, DPM)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.06		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$0.00 (entity's fee) / 4 (requesting defendants)	\$0.00
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -237 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 13 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requester 13 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$35.00		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

3.17.08

20-709 - Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
3/14/2008	017563.332.08

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Rehabilitation Hospital of the Cape and Islands, Inc.		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.08		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locator	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$26.47 (entity's fee) / 4 (requesting defendants)	\$6.62
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -232 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 18 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requester 18 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$41.62		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

3-17-08

20-909-Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
3/16/2008	017563.332.04

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Baystate Plastic Surgery Associates (Melissa A. Johnson, MD)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.04		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locator	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$4.75 (entity's fee) / 4 (requesting defendants)	\$1.19
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -228 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 22 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 22 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$36.19		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

3-17-08

20-709 - Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/1/2008	017563.332.05

706 Walnut Street, Suite 102
P.O. Box 908

Tax ID: 20-1143503

Knoxville, TN 37902-0908

Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Davis Square Family Practice (Deborah Bershel, MD)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.05		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locator	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$25.00 (entity's fee) / 4 (requesting defendants)	\$6.25
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -230 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 20 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 20 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$41.25		

Please either return a copy of this invoice with your payment or reference the invoice number.

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

4.1.08
20-709 - Payment for Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/1/2008	017563.332.11

706 Walnut Street, Suite 102
P.O. Box 908

Tax ID: 20-1143503

Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Office of Randi Kaufman, Psy.D		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.11		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job (based on number of joining lawyers)	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$0.00 (entity's fee) / 4 (requesting defendants)	\$0.00
Online Delivery (Including Scanning, DCR, Bates Numbering and Storage Service)	<250 pages - Automatic and Complimentary -245 (pages over 250) x .045	\$0.00
Hardcopy Delivery (Copying and 3 Hole Punching)	If requested: 5 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 5 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$35.00		

Please either return a copy of this invoice with your payment or reference the invoice number.

4.1.08
20-709-

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

Payment for copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/22/2008	017563.332.03

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Center for excellence in Diabetes education (Jeffrey Korff, MD)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.03		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job (based on number of joining lawyers)	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locator	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$0.00 (entity's fee) / 4 (requesting defendants)	\$0.00
Online Delivery (Including Scanning, DCR, Bates Numbering and Storage Service)	<250 pages - Automatic and Complimentary -230 (pages over 250) x .045	\$0.00
Hardcopy Delivery (Copying and 3 Hole Punching)	If requested: 20 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 20 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$35.00		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

4-24-08
20-709- Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/22/2008	017563.332.10

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Office of Susan C.oud, M. d		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.10		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job (based on number of joining lawyers)	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$20.00 (entity's fee) / 4 (requesting defendants)	\$5.00
Online Delivery (Including Scanning, OCR, Bates Numbering and Storage Service)	<250 pages - Automatic and Complimentary -235 (pages over 250) x .045	\$0.00
Hardcopy Delivery (Copying and 3 Hole Punching)	If requested: 15 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requestec 15 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$40.00		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

4-24-08

20-709-Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/22/2008	017563.332.01

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Office of Carolyn J. Kendall, MD c/o Cooley Dickinson Practice Assoc		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.01		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job (based on number of joining lawyers)	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$0.00 (entity's fee) / 4 (requesting defendants)	\$0.00
Online Delivery (Including Scanning, OCR, Bates Numbering and Storage Service)	<250 pages - Automatic and Complimentary -192 (pages over 250) x .045	\$0.00
Hardcopy Delivery (Copying and 3 Hole Punching)	If requested: 58 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 58 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$35.00		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

4.24.08

20-709- Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/23/2008	017563.332.07

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Ronald . Hirschberg, MD c/o Physical Medicine & Rehabilitation		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.07		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job (based on number of joining lawyers)	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$25.00 (entity's fee) / 4 (requesting defendants)	\$6.25
Online Delivery (Including Scanning, OCR, Bates Numbering and Storage Service)	<250 pages - Automatic and Complimentary -241 (pages over 250) x .045	\$0.00
Hardcopy Delivery (Copying and 3 Hole Punching)	If requested: 9 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 9 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$41.25		

Please either return a copy of this invoice with your payment or reference the invoice number.
Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

4.24.08

20-709- Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/25/2008	017563.332.12

706 Walnut Street, Suite 102

P.O. Box 908

Knoxville, TN 37902-0908

Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728

(866) 592-9861 (Toll Free)

(615) 301-1708 (Nashville)

(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Gender Dysphoria Program, Inc. (c/o Judy Van Maasdam, MA)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.12		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job (based on number of joining lawyers)	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$30.00 (entity's fee) / 4 (requesting defendants)	\$7.50
Online Delivery (Including Scanning, OCR, Bates Numbering and Storage Service)	<250 pages - Automatic and Complimentary -230 (pages over 250) x .045	\$0.00
Hardcopy Delivery (Copying and 3 Hole Punching)	If requested: 20 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 20 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$42.50		

Please either return a copy of this invoice with your payment or reference the invoice number.

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

4.28.08

20-709

Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
4/29/2008	017563.332.17

706 Walnut Street, Suite 102

P.O. Box 908

Knoxville, TN 37902-0908

Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728

(866) 592-9861 (Toll Free)

(615) 301-1708 (Nashville)

(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Walgreens Pharmacy		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.17		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job (based on number of joining lawyers)	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locator	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$55.00 (entity's fee) / 4 (requesting defendants)	\$13.75
Online Delivery (Including Scanning, OCR, Bates Numbering and Storage Service)	<250 pages - Automatic and Complimentary -249 (pages over 250) x .045	\$0.00
Hardcopy Delivery (Copying and 3 Hole Punching)	If requested: 1 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 1 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$48.75		

Please either return a copy of this invoice with your payment or reference the invoice number.

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

4-29-08
20-709- Copies of medical records



INVOICE

INVOICE DATE	INVOICE NUMBER
5/12/2008	017563.332.09

706 Walnut Street, Suite 102

P.O. Box 908

Knoxville, TN 37902-0908

Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728

(866) 592-9861 (Toll Free)

(615) 301-1708 (Nashville)

(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Atlantic Prosthetics & Orthotics Co., Inc.		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.09		
(calculation)		AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$0.00 (entity's fee) / 4 (requesting defendants)	\$0.00
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -233 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 17 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 17 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$35.00		

Please either return a copy of this invoice with your payment or reference the invoice number.

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

5-14-08

20-709-Copies of medical records.



INVOICE

INVOICE DATE	INVOICE NUMBER
5/13/2008	017563.332.16

706 Walnut Street, Suite 102

P.O. Box 908

Knoxville, TN 37902-0908

Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728

(866) 592-9861 (Toll Free)

(615) 301-1708 (Nashville)

(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
CVS Pharmacy Privacy Office		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.16		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$50.00 (entity's fee) / 4 (requesting defendants)	\$12.50
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -231 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 19 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 19 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$47.50		

Please either return a copy of this invoice with your payment or reference the invoice number.

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

5.14.08

20-709-Copies of medical records.



INVOICE

INVOICE DATE	INVOICE NUMBER
5/29/2008	017563.332.18

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Baystate Medical Center (Medical Records)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.18		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locater	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$91.16 (entity's fee) / 4 (requesting defendants)	\$22.79
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -126 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 124 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 124 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$57.79		

Please either return a copy of this invoice with your payment or reference the invoice number.

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

62.08
20-709 - Copies of medical Records



INVOICE

INVOICE DATE	INVOICE NUMBER
8/30/2008	017563.332.15

706 Walnut Street, Suite 102
P.O. Box 908
Knoxville, TN 37902-0908
Phone: (865) 546-4727 (Knoxville) FAX: (865) 546-4728
(866) 592-9861 (Toll Free)
(615) 301-1708 (Nashville)
(901) 405-4584 (Memphis)

Tax ID: 20-1143503

BILL TO:	SHIP TO:
Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville TN 37219-2424	Mr. W. Scott Sims Walker, Bryant, Tipps & Malone 2300 One Nashville Place 150 Fourth Ave N Nashville, TN 37219-2424

CASE INFORMATION		
Wiehe v. Zimmerman, M.D., et al		
SOURCE OF EVIDENTIARY ITEMS		
Rite Aid Pharmacies - Legal (Attn: Brandy Gladwin)		
JOB NUMBER	FILE NUMBER	CLAIM NUMBER
332.15		
DESCRIPTION	(calculation)	AMOUNT
Phase 2 Job <small>(based on number of joining lawyers)</small>	1-4 = \$35.00; 5-8 = \$30.00; 9 or more = \$25.00	\$35.00
RAS Locator	If requested: \$28.00 located; \$7.00 not located	\$0.00
RAS Split	Applicable to each requesting defendant or UM lawyer: \$50.00 (entity's fee) / 4 (requesting defendants)	\$12.50
Online Delivery <small>(Including Scanning, OCR, Bates Numbering and Storage Service)</small>	<250 pages - Automatic and Complimentary -245 (pages over 250) x .045	\$0.00
Hardcopy Delivery <small>(Copying and 3 Hole Punching)</small>	If requested: 5 (number of pages) x \$.085	\$0.00
Postage and Handling	Applicable only with hardcopy delivery	\$0.00
Page Capture, or OCR	If requested: 5 (number of pages) x \$.085	\$0.00
Routing Cost	Billed at Cost for Routing Original Copy	\$0.00
RAS Rush	If requested: 0 (days under 28 day due date) x \$2.00	\$0.00
Radiographic Images	Billed at Cost - No cost sharing	\$0.00
Digitize Radiographic Films	Billed at Our Cost - \$42.00 per sheet	\$0.00
Miscellaneous Fee		\$0.00
PLEASE PAY THIS AMOUNT: \$47.50		

Please either return a copy of this invoice with your payment or reference the invoice number.

Payment is due upon receipt, unless you have arranged otherwise.

We appreciate the opportunity to serve you!

9.3.08
20-709-copies of medical records